

Date: _____

Dear _____:

Hello. I am writing to you because you have been identified as a student who earned three or more credits in a career and technical education program area in high school. We hope that you are doing well, and we are interested in your current pursuits. Please update us by completing and returning the Career and Technical Education Concentrator (CTE) Follow-up Survey **on or before March 15, 2009**. The information that you provide will be used, along with information provided by your classmates, in a report to Congress to encourage continued funding for CTE programs such as the one you were enrolled in while in high school.

Thanks so much for your cooperation!

Sincerely,

CAREER and TECHNICAL EDUCATION CONCENTRATOR FOLLOW-UP SURVEY

(Complete and return this survey by 3/15/2009)

Have you graduated from high school? _____ Yes _____ No

Please indicate your **current** status by checking **all** items that apply:

_____ Post-secondary Education

Enrolled in community college, Tennessee Technology Center, four-year college/university, apprenticeship, private cosmetology school, or private technical school.

If you enrolled in any of the above institutions, continue the following items:

Institution: _____

Your major or courses focus: _____

List remedial courses taken (if any) or NA if not applicable: _____

List all the dual credits used (if any) or NA if not applicable: _____

List all the articulated course (Tech Prep) credits awarded (if any) or NA if not applicable: _____

List all post-secondary certifications or licenses awarded (if any) or NA if not applicable: _____

_____ Military

Branch: _____

_____ Employed

Employer: _____

Job title: _____

_____ None of the Above

Is what you are currently doing related to your area of career and technical concentration in high school?

My high school area(s) of concentration (list all): _____

_____ Yes, it's related to my concentration of _____

_____ No, my current area of concentration is _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Optional: Phone: (____) _____ E-Mail: _____